Hepatitis-C Program

Annual Report (Mar'21-Mar'22)
Viral hepatitis is the eighth highest cause of mortality globally and was responsible for an estimated 1.34 million deaths in 2015. Globally, approximately 71 million are chronically infected with hepatitis C. Pakistan and Egypt bear 80% of the disease burden. Many people catch this infection in health care settings without being aware of it. The disease is called a silent killer because many patients remain undiagnosed and untreated for many years before developing complications and dying. A high prevalence of infection is reported in children, especially those who were admitted to hospitals with acute hepatitis.
Goal of Program

Because of high consumption of sugar in everyday lifestyle and lack of awareness, the incidence of Diabetes in the rural district of Thatta is quite high. Infact, our data indicates that there is a higher prevalence among younger populations. Therefore, our program was formed with the following goals:

1. Identification of the population in Gharo at risk of Hepatitis C and provide medical care to the people identified.
   - Screen patient(s) suffering from Hepatitis C using antibody testing.
   - Ask the individual(s) about potential exposure(s) to Hepatitis C.
   - Investigate in detail using blood workup of the current disease status.
   - Provide medical care to the patients exposed to Hepatitis C.
   - Snowball using the identified people from the community to cover the complete population in Gharo.

2. Create and disseminate educational material for the beneficiaries for Hepatitis C awareness.
   - Using existing literature, medical advice from Gharo clinic physicians and external collaboration, create education material for the public.
   - Incorporate LHW to help disseminate the awareness at the clinic and then expand towards the community.
   - Train medical staff in safe injection practices and effective sharp and waste management.

3. Initiate a vaccination drive for the community against Hepatitis B.
   - Acquire Hepatitis B vaccination through effective collaboration.
   - Train medical staff in vaccine delivery.
   - Maintain a cold chain to store the vaccination ampules effectively.
Staff & Team Members
THE AWESOME PEOPLE BEHIND THIS PROJECT

DR. SYED UZAIR MAHMOOD
PROGRAM DIRECTOR

DR. MARVI MEMON
PROGRAM HEAD-PAKISTAN

ZAHEER LAGHARI
PROGRAM MANAGER

DANISH SAAD
DATA ENTRY OPERATOR
2019 total screenings

327 Positive screening

167 patients confirmed as Hepatitis-C

142 registered in the Hep-C program
### Financial snapshot

**ANNUAL COSTS**

- Human Resources: Rs.2,500,000
- Medicine and Supplies: Rs.10,646,207
- Total cost of project: Rs.13,146,207

**PER PATIENT COST BREAKDOWN**

- Medicine/patient: Rs.3,623
- Lab test: Rs.1,586
A 45-year-old male came with the complaint of yellow discolouration of skin. He also suffered from high grade frequent spells of fever. On further examination at the SHINE Humanity Garibsons clinic, he was diagnosed with Hepatitis-C and was treated for an year until the PCR results came out negative and he was symptom free.
Patient Demographics

- Females: 67%
- Males: 33%

Number of patients:
- 18-25 yrs: 10
- 26-35 yrs: 40
- 36-45 yrs: 50
- 46-55 yrs: 20
- 56-65 yrs: 30
- 66-75 yrs: 10
- 76+ yrs: 0

Number of patients
11% of the patients have been completely treated and are symptom-free from the disease.
Patient Attrition data

15% of the people identified as Hepatitis-C patients did not follow up on their treatment

Medication/patients

<table>
<thead>
<tr>
<th>Medication</th>
<th>Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metformin+Glipizide</td>
<td>16</td>
</tr>
<tr>
<td>Metformin only</td>
<td>20</td>
</tr>
<tr>
<td>Cholestrol medication</td>
<td>12</td>
</tr>
<tr>
<td>Hypertensive medication</td>
<td>25</td>
</tr>
</tbody>
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Thank you for your contribution!